U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U -	2. Fiscal Year Covered From:				
	1 / 1 / 2004 Through: 12 / 31 / 2004				
3. Name and address of person filing.	Name, file number, and address of labor organization.				
Name Ernest F Dorsey	Name Boilermakers Local 193				
	Labor Organization File Number 006-176				
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any				
Street 3727 Nile Road	Street 1101 W. Patapsco Avenue				
City Davidsonville	City Baltimore				
State Maryland ZIP Code + 4 21035	State Maryland ZIP Code + 4 21230				
5. Position in labor organization. Business Manager					
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.					
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.				
Name Babcock & Wilcox Construction Company	Dinner Meeting to discuss upcoming work outlook and areas of concern on previous jobs.				
Trade Name, if any: B&W					
P.O. Box, Bldg., Room No., if any					
Street 90 East Tuscarawas Avenue	7.b. Amount.				
City Barberton	3 and the second contract of the contract o				
State Washington ZIP Code + 4 44203					
Signature					
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)					
CI FI	American and a second control of the second				
Signed prived to Sorsey	On 08/08/2005 410-355-2344 Telephone Number				
Form LM-30 (2003)	r diephone Multiper				

Walle of Gradining Ernest Dorsey		riie Number <b>U-</b>				
B. Held an interest in or derived income or economic benefit with monetary value <b>from a business</b> (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.						
8. Name and address of Business (including trade name, if any).	9. Business deals with:					
Name Northeast Area Apprenticeship Program	NZI					
Trade Name, if any:	a. Labor Organization b. Trust					
P.O. Box, Bldg., Room No., if any	c. Employer					
Street 297 Burnside Avenue	~*************************************					
City East Hartford						
State   Connecticut   ZIP Code + 4   06108						
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.					
Name	Provides craft training to our members.					
Trade Name, if any:			increase and a second			
P.O. Box, Bldg., Room No., if any			www.			
Street		and the second				
City	11.b. Approximate dollar valu	ue of such dealing.	\$2,594,604			
City	12.a. Nature of interest held or income received.  Labor Management dinner to discuss training and					
State  ZIP Code + 4  Entitivities and the control of the control o	safety for our mem	bers.				
	12.b. Amount.		\$65			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.						
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	annonementen en e				
Name						
Trade Name, if any:						
P.O. Box, Bldg., Room No., if any						
Street						
City						
State ZIP Code + 4		mikkenne stande skriver elder en stande skriver om en en en skriver om en en en skriver om en en en en en en e	1980 (John Belling Belling and Angeling and Angeling and Angeling and Angeling and Angeling Angeling Angeling			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.					

Name of Person Filing Ernest Dorsey	File Number <b>U</b> -
	i ne italinei <b>u-</b>

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

Name and address of Business (including trade name, if any).	9. Business deals with:		
	o. Business deals with.		
Name Northeast Area Apprenticeship Program	a. Labor Organization		
Trade Name, if any:	a. Labor Organization		
	b. Trust		
P.O. Box, Bldg., Room No., if any	European		
Street 297 Burnside Avenue	c. Employer		
City East Hartford			
State Connecticut ZIP Code + 4 06108			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name	Provides craft/training to our members in the Northeast Area.		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any		is a many constant of the cons	
Street		errorer salvalum en en	
City			
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$2,594,604	
	12.a. Nature of interest held or income received.  Meeting and dinner to discuss recruitment and manpower needs in the Northeast.		
		·	
		annoway.	
		acconnected in	
		waterware received	
	12.b. Amount.	\$48	